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AUTHOR Taylor, Rhea A.; And Others
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ABSTRACT

Discussed in remarks by two special education teachers and two administrators from Kentucky are the development and use of the Lexington Developmental Scale (LDS) with multiply handicapped preschool children. It is explained that the LDS covers five skill areas: gross and fine motor, receptive and expressive language, cognitive, personal-social, and emotional development. The LDS is noted to be available in short form as a screening device and in long form for classroom programing. The use of the LDS in a Head Start program and its adaptation for culturally different children are also considered. (CL)

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REGIONAL COOPERATIVE INNOVATIVE EFFORTS FOR PRESCHOOL MULTIHANDICAPPED CHILDREN

FOR THE RECORD

Introduction: Mrs. Rhea A. Taylor, Executive Director
UCPB Child Development Centers, Lexington, Kentucky

I am Flonnia Taylor. This session today could be titled: Teachers Proof or Tangible Tool for Parent-Teacher Relations or a Tool for Accountability or The Basis for Agency Cooperation. But if you have weathered the title given in the program you will be glad to know we prefer the subject: For The Record. We have 4 panelists each of whom will talk from 3 - 8 minutes showing slides and sharing with you some of the reasons for their successes. Then we'll have a mini-tape session with you participating with us in your reaction to the child's behavior. Then we have a question period. So if you'll hold your questions until then we'll be grateful.

The title of this presentation "For the Record" was chosen because each teacher is required to keep records -- and most of us detest the job. However, all of us, I believe, feel less repulsion for records when we know that those records support our work, and offer indisputable proof of our successes.

The UCPB Child Development program was started long before the great national impact on education for the handicapped. Twenty years ago there were no educational facilities for handicapped children either public or private in Central and Eastern Kentucky. In our Agency which serves 22 counties we were first in Kentucky to require uniform case records, we were first in transportation, first in camping and swimming programs, in the use of trained volunteers in the classroom, first in education of infants through a Parent-Infant program, parent training as well as parent counseling, we involved the community through the use of civic and social clubs and we gave a great push toward cooperative services.

The paid staff selected by UCPB were highly scholastically trained. They were from the fields of special education, speech therapy, social work and physical therapy. Other professionals were utilized on a consultative or volunteer basis. The Board of Directors represented a cross-section of business and professional people. The Child Development Centers which started in "loaned offices and Sunday School rooms" and in run down old buildings now has a completely modern functional building which was paid for within one year without state or federal funds and the rural centers are on college campuses in college owned buildings.

Now there is a close association in Central Kentucky between all agencies working with young children including our State Department of Human Resources, County Public Health Departments, Comprehensive Care (Mental Health-Mental Retardation), Head Start programs and other private agencies similar to UCPB such as the Bluegrass Association for the Mentally Retarded. Twenty years ago one agency did not know what the other did except in a vague way. UCPB started an Executive Luncheon Club. This organization has now become the United Way Executive Club.

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Mrs. Rhea A. Taylor
For The Record
Council for Exceptional Children
April 9, 1976

Today I am pleased to introduce to you some of the staff that made it possible for us to place in public school classes more than 1,200 children--many of whom were considered by doctors and psychologists and parents to be mentally retarded -- and too physically handicapped to walk or talk, or to learn to dress themselves much less to read and write. Now they compete successfully with non-handicapped children in regular public school classes.

Mrs. William S. Ward came to us as a volunteer after many years as a public school teacher and supervisor. Upon the departure of one of our teachers from the state of Kentucky we invited Mrs. Ward to become a Head Teacher. She has a Master's degree. She not only accepted but she has spearheaded several innovations in our program. Since she was the innovator of the Lexington Developmental Scale she will be first on the panel.

We now present two highly successful workers in the Head Start program in Kentucky, Mrs. Cleo Lowry, Program Coordinator of the Parent-Infant program in Breckinridge and Grayson Counties will be assisted by Mrs. Charla Crowell. Not with us today except in spirit is Mrs. Loretta Lunsford, formerly Program Coordinator of Kentucky River Foothills Head Start District.

Mrs. Thomas C. Greis who is our Kindergarten teacher assisted Mrs. Ward in the development of our assessment tool. She will discuss "Hands Across the Sea."

We were scheduled to have Dr. John Irwin, past president of ASHA and presently the occupant of the Pope M. Farrington Chair at Memphis State University, next on the program. However, due to an illness and emergency he was unable to attend today. Dr. Irwin was sent to us by the Bureau for Education of the Handicapped in Washington as an Evaluator of our First Chance Project. He also is currently serving as chairman of the Speech and Language Clinic at Memphis State. He played a great part in persuading us to share with others the instrument that made our work so successful. We are very sorry Dr. Irwin was unable to be with us today.

Mrs. Greis will now show a mini-tape -- a brief sampling of some of the items on the LDS and answer any questions which you may have.

"POCKET NOTES ARE NOT ENOUGH"
Mrs. William S. Ward
Council for Exceptional Children Conference
Chicago, Illinois
April 9, 1976

I. Origin

In 1965 the Lexington Child Development Center was using several charts to check on children's progress - mainly in the motor and personal-social areas. The charts were not easily interpreted to the parents nor did they show in a graphic manner the changes that had taken place in a child during the period he had been enrolled in the program. The teachers felt the need for a form that would include more areas of the child's development, as well as overcoming the shortcomings of the charts they were using.

II. Development

A fairly extensive survey of materials available at that time in the pre-school area discovered nothing on the commercial market nor in the current literature which met all our requirements. Therefore, the teachers wrote the first version of the Lexington Developmental Scale. In the years since then there has been a continuous modification process before the scale reached its present form. These changes came about after using it in the classroom, using it with parents, "hash" sessions among the teachers, and suggestions from several experts outside the Agency.

Three years ago a complete revision was undertaken and more up-to-date references were used to document the items. Several difficulties were encountered in this process. First, it was found that not only did different authors disagree about the age placement of an item, but in several cases one author was found to disagree in the recommended placement from one publication to another. This dilemma was solved in two ways. First, whenever possible, an average was struck between the various opinions and this placement was used - example; skipping was placed at the 5 year old level. Second, a substitute item was used on which there was not such variant opinions. Example crossed arrows for a diamond. All items were documented with two exceptions. First, no norms were available for crawling and ball bouncing. The teachers felt that these were valuable skills to contribute to overall motor coordination and eye-hand coordination so they set up what they had found to be general norms for each age. Secondly, in a few cases the search for an item in the continuum was not found in the sources used. (In 4 cases) the teachers filled in with items gained from their own knowledge and from their own experience - example, behavior in front of a mirror on the infant scale at 1 1/2 years.

A considerable effort was made to extend the norms, to eight years but two main difficulties were encountered. Norms for many of the items used are not available in the same form after school age. Second, for many of the norms standardized tests are encountered which vary greatly in validity, reliability, what they cover, etc.

III. Unique Features and Description

In its present format the long form of the scale covers five areas: Motor (gross and fine), Language (receptive and expressive), Cognitive, Personal and Social and the Emotional. The unique features are (1) the items are arranged by sequential age growth, (2) the items are arranged to show (more or less) a continuous flow of the development of one skill, example, from pincer grasp to writing; (3) the graphs which result from the pre- and post-survey area are very easily interpreted to parents - using the pre-intervention graph to show the teacher (and the parent) at what level the child was functioning and the post-intervention graph to show the changes that have taken place, (So far as we know there is no other scale which has all of these features.) (4) the scale also has the merit that it can be used with normal, handicapped or culturally deprived children, (5) the scale provides for a definite measure of accountability, and (6) the short form has 1/2 the number of items as the long form but for screening the correlation of results between the two has been very high.

The Emotional area was included in the long form for several reasons. First, this area reflects in a child's performance in the other four areas. Second, emotional problems may be at the root of problems in other areas. Third, too often a chart or a report on a child is sent out reflecting only the more easily measured areas whereas the emotional pervades all of the development of the child in the classroom, with his peers, and with his family. The Emotional area is based on a one to five scale, not on age norms as is the rest of the scale, since there has not been sufficient research done to establish age norms.

An effort was made to make the continuum flow from the infant scale directly to the Early Childhood scale but in some cases this proved insoluble. This was mostly due to the fact that certain items in the development of a child change so much around the age of two years. This was the reason this age was chosen as the point at which to make the break between the two scales. In actual use a child may rate at some levels on the Infant scale and some on the Early Childhood. Provisions have been made in the marking system to indicate this type of scoring. In the planned commercial publication there will be only one scale instead of two separate ones to facilitate scoring a child who rates below 2 years on some items and above 2 years on others.

IV. Purpose

The long form of the LDS was designed to be used by teachers as an instrument for assessing children; as an aid in helping parents to better understand their own child; as a basis for curriculum planning for the total class and for the individual child; as a means of evaluating the progress of the entire class and of the individual child. In addition, the results may be used by administrators for many purposes.

V. Administration and Purpose of the Two Forms

The long form of the scale is to be administered by the classroom teacher, with some of the information obtained from the parents. The information from the parents is not accepted without the awareness of possible parental bias. Classroom performances are weighed along with the information furnished by the parents before recording final ratings.

Under ideal circumstances an initial individual interview with each child plus one to two weeks observation and participation period in a class meeting 3 hours per day is needed to obtain a fair assessment. Many other time allotments can be worked out to meetthe needs of various groups. This amount of time depends upon many factors, i.e., number of children per teacher, number of teaching assistants, etc. As in any good teacher-pupil relationship, a great deal of warmth and the spirit of making this a "game" are important to the success of this type of assessment. As one teacher has said, you have to be a good "ham actor" to be a good teacher.

The purpose of the short form is primarily for use as a screening and prognosis tool for social workers, visiting nurses and other personnel who have only a one-shot interview with the child often only 30 - 45 minutes and in a non-school setting. The short form is also being used by Kindergartens, Head Start and other early childhood groups - falling back on the long form for a much more detailed survey, whenever this need is indicated.

Much has been said and written about starting the child "where he is" and knowing "how far the child has gone." It is believed that the LDS is a good tool to determine this for the pre-school child.

Remarks by Mrs. Loretta Lunsford
Council for Exceptional Children Conference
Chicago, Illinois
April 9, 1976

About the time that Region IV, which includes Kentucky and seven other southeastern states, promoted the use of the LAP I learned about the UCPB Child Development Centers' Lexington Developmental Scale. We tried the LDS and compared it with the LAP and a number of other assessment tools.

For us in the Kentucky River Foothills Head Start the LDS is easier to use. It is an excellent screening tool and serves as a base for curriculum planning. (1) It is simpler; (2) it shows a profile on one page as to where the child is the beginning of the year and where he is at the end of the school year; (3) it helps teachers individualize their children and set immediate and long term goals; (4) it reveals any lag or any achievement beyond the norm; (5) it is useful in parent conferences because the parent can see and test any strength or weakness at home; and (6) it can be computerized for administrative use as an accountability tool.

Our entire staff of 85 people like the LDS and find it useable for all children, not only the handicapped.

But training did not stop with the use of the LDS. The agency gave consultation services anytime I requested, by telephone or visits. Our workers were trained in parent involvement - an important aspect of our program, in knowledge of community resources and how to use them, and in classroom speech and language development.

Remarks Made by Mrs. Cleo Lowry
Council for Exceptional Children Conference
Chicago, Illinois
April 9, 1976

First, I want to say most people have no idea what Head Start is doing across the nation -- and I am pleased to report to this group what we are doing for culturally deprived children and their families (this also includes the handicapped child) in Breckinridge and Grayson Counties, Kentucky.

As you know, it is a law that all Head Start programs must follow the Performance Standards which were written to meet the federal Inter-Agency Day Care requirements. Those who do not meet these standards will be on probation for three months to allow time to bring their program into compliance. If the guidelines are not met at the end of the probationary period, then their program will be defunded. These guidelines are NOT unreasonable and should have been in effect years ago.

To quote from 1304.2, Part 2-d of the Performance Standards. "The education services component of the plan shall provide procedures for on-going observation, recording and evaluation of each child's growth and development for the purpose of planning activities to suit individual needs." End quote.

Our program serves children from birth to 6 years of age. To meet the criteria, the mother must come into the center with her child on a scheduled basis. Until age of three, the mother is taught to be the teacher of her child. Our program is unique in that we are a comprehensive educational program from birth through 6.

We prefer to start with the pregnant mother. The mother attends pre-natal and post-natal classes in the center. We emphasize such things as her attitude, proper exercise, nutrition, and the importance of these to the proper development of her child including delivery.

Approximately 6 weeks after the child is born, the mother and the child comes into the center. During the interim period, an infant educator visits the mother in the home.

Our classroom structure is:
Infant Class
Toddler Class
Two's Class
3 - 4 - 5 Year Old Classes

We feel that it is very important to start at this early age.

We have 100 enrolled children from birth to three years of age with 10 Infant Educators to assist the mother in the developmental process of her child - - - also a program of center activities to enhance the role of the mother.

Head Start beings with 69 3-year-olds through age 5, or until the child enters public school. We work closely with the public schools, and make follow-up visits on our Head Start children. This past year was our most

In order to have documentation of the children's progress, we researched several evaluation tools before we found an assessment that would meet the Performance Standards. We chose the Lexington Developmental Scale because it gives us information about how much the child has achieved in five areas of development and can be administered by para-professional staff. We receive a computer print-out on each child and each classroom. Evaluation is done semi-annually on children under 2. A pre-post assessment is obtained for the program year for ages 2 - 6.

In addition to the LDS, an intellectual evaluation is obtained twice yearly using the Peabody, WISC and Bayley.

With this data we are able to substantiate our program's progress and the need for this type of program in our rural area.

Now, Charla Crowell, our Program Education Coordinator, will show you a few slides of our program.

"HANDS ACROSS THE SEA"
Mrs. Thomas C. Greis
Council for Exceptional Children Conference
Chicago, Illinois
April 9, 19

When we first started compiling and putting together the Scale we called it by various names, usually the "thing." Then when it was finished it was given the name The Lexington Developmental Scale - and like all things now days it was shorter to say LDS. Being of weak mind and living in a university town, I found myself getting mixed up and often called it the LSD. But I would like for you to know the Scale is like LSD because it is a stimulus.

You have heard Mrs. Ward comment that we started the scale to be of benefit to our teachers, but when it was completed we realized that we did have something to share with other teachers and people interested in evaluating children. At this time there was still nothing on the market that met these needs.

Then we asked, "Could we be of help to someone else?" "How could we give this to others?"

Not long after this we came in contact with some teachers in Hawaii who were interested in finding some way of assessing their children. They had no way of accounting for what progress they had made. Our staff was asked to go to Hawaii and share the LDS with them. We went to teach but we too learned a great deal in Hawaii. First we realized something about other cultures. The first thing these teachers wanted to see was an assessment of a child, and I was elected to do an on-the-spot assessment of a child of Chinese origin who was in one of their programs. I realized quickly some of the differences in our culture.

EXAMPLES:

Item 1 on Language: when asked to classify pictures - was not familiar with some pictures, especially zoo animals and fruits.

Item 5 on Language: when showed pictures called coffee pot a tea pot, didn't know fork, would have known chopsticks.

In the Personal-Social area we put lots of emphasis on lacing and tying shoes and in Hawaii children do not wear shoes to school; if so, little sandals, so were unaccustomed to these skills.

After we returned to Lexington we corresponded with their teachers who were using the LDS, and worked with adapting the scale to fit the needs of their culture.

EXAMPLES:

Terminology in language was the most important change, using language and colloquism of the vicinity in which they live.

When pictures were used, ones were chosen that were common to their locality. Papya was used in place of apple, palm tree used in place of oak tree, chopsticks used in place of knife, fork, and spoon.

In the Personal-Social area extra self help skills were added to replace shoe tying.

In our wash-n-wear world the iron picture was removed because so many children do not come into contact with it.

The scale may also have to be revised slightly for parts of the United States with Mexican-Americans, Indians, and the culturally deprived of our own Kentucky Appalachian area.

At the present time we are beginning to work with people in Alaska where rural and isolated areas are being reached by social workers and many primitive Eskimos are being served. Again adaptations will be needed by those in Alaska who use the LDS.

Through workshops and consultation we have found we can be of maximum benefit to people who want to use the LDS. These are done by participants coming to our Center or by our staff going to their locality.

Our workshops can be a one or two day session, or even more, depending upon the full range of items participants are interested in learning about. We start a workshop with an explanation of the LDS - specifics of how to use and score it. Then we show a video tape of a child being assessed. Each person has a scale and we score item for item and discuss any questions which might arise in people's minds. We do this for Motor, Language and Cognitive items. We usually do an actual demonstration of a child using the Short Form LDS so participants can see just what the evaluator does. If time permits, we have many inexpensive, homemade materials which can be used later by teachers as teaching tools for the LDS items. These can be shown and explained.

Since our agency has worked for 20 years with many other agencies we have gained some knowledge in the various techniques of helping children. Many people are interested in learning some of our techniques. Parental involvement, child management, parent counseling by social workers, and use of community resources are some of the topics which can be included in workshops, along with the use of the LDS and record keeping.

The LDS allows us to find what a child can do and cannot do. It makes teaching easier and sets up goals to follow.

Since the LDS has been a stimulus to us, could we give you the opportunity to see how it works?

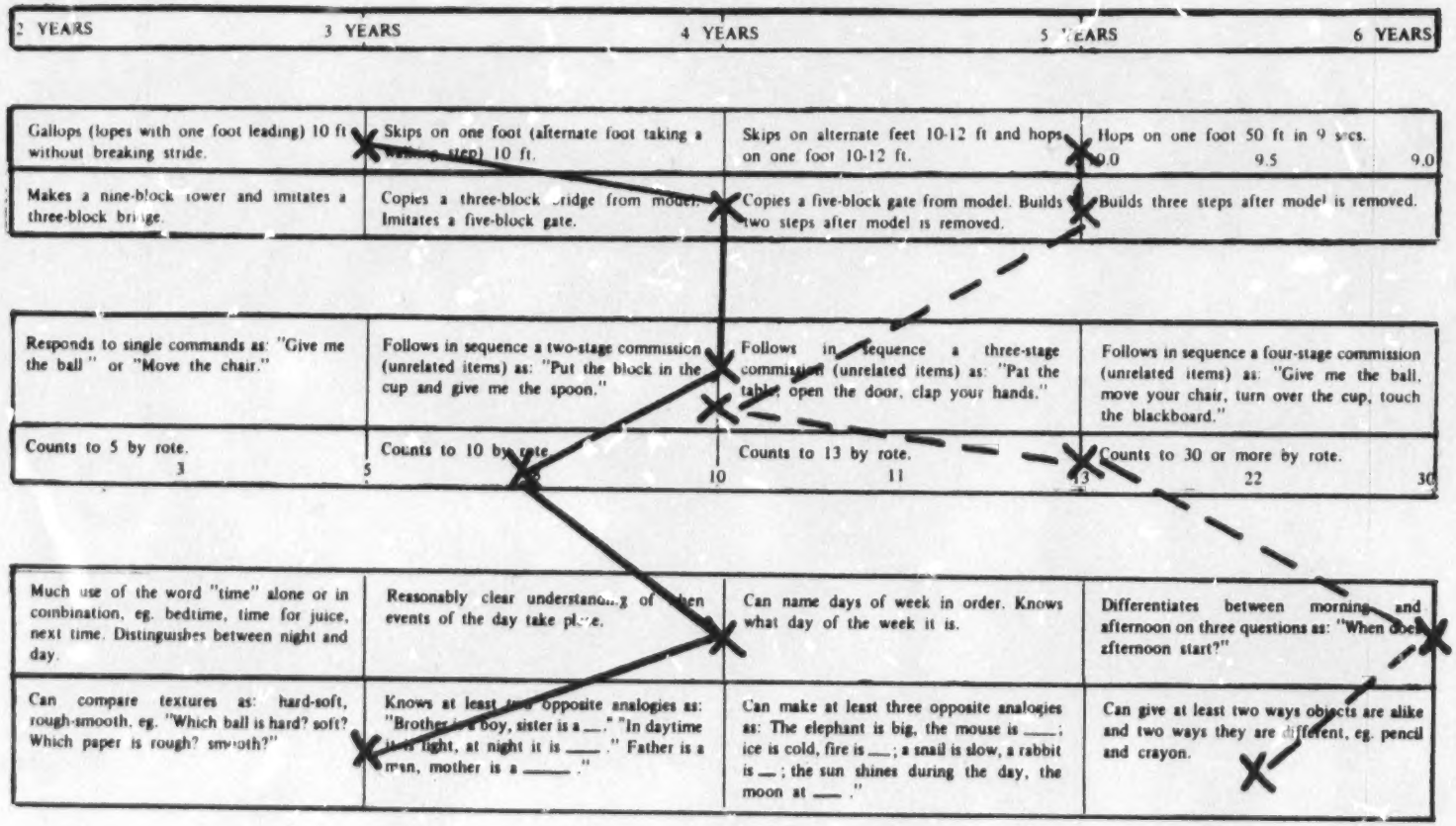
This is a "mini" film similar to those used in our workshops. The teacher is assessing a child in our program. Two sample items were taken from the Motor, Language and Cognitive pages of the LDS.

You are being given a sample copy and we would like you to assess along with us. We will make an X at the level the child is functioning. There are three places to mark on the scale: unsuccessful, partially successful, and successful.

We will assess both the pre- and post-tests. Stephanie is 4 years, 0 months on the pre-test and 4 years, 9 months on the post-test.

SAMPLE ITEMS FROM THREE AREAS OF THE LEXINGTON DEVELOPMENTAL SCALE

Child's Name: Stephanie
Pre-test C.A.: 4-0
Post-test C.A.: 4-9


2 YEARS
3 YEARS
4 YEARS
5 YEARS
6 YEARS
MOTOR AREA
Gallops (lopes with one foot leading) 10 ft without breaking stride.
Skips on one foot (alternate foot taking a walking step) 10 ft.
Skips on alternate feet 10-12 ft and hops on one foot 10-12 ft.
Hops on one foot 50 ft in 9 secs.
9.0
9.5
9.0
Makes a nine-block tower and imitates a three-block bridge.
Copies a three-block bridge from model. Imitates a five-block gate.
Copies a five-block gate from model. Builds two steps after model is removed.
Builds three steps after model is removed.
LANGUAGE AREA
Responds to single commands as: "Give me the ball" or "Move the chair."
Follows in sequence a two-stage commission (unrelated items) as: "Put the block in the cup and give me the spoon."
Follows in sequence a three-stage commission (unrelated items) as: "Pat the table, open the door, clap your hands."
Follows in sequence a four-stage commission (unrelated items) as: "Give me the ball, move your chair, turn over the cup, touch the blackboard."
Counts to 5 by rote.
3
5
Counts to 10 by rote.
10
Counts to 13 by rote.
11
13
Counts to 30 or more by rote.
22
30
COGNITIVE AREA
Much use of the word "time" alone or in combination, eg. bedtime, time for juice, next time. Distinguishes between night and day.
Reasonably clear understanding of when events of the day take place.
Can name days of week in order. Knows what day of the week it is.
Differentiates between morning and afternoon on three questions as: "When does afternoon start?"
Can compare textures as: hard-soft, rough-smooth, eg. "Which ball is hard? soft? Which paper is rough? smooth?"
Knows at least two opposite analogies as: "Brother is a boy, sister is a ___." "In daytime it is light, at night it is ___." Father is a man, mother is a ___."
Can make at least three opposite analogies as: The elephant is big, the mouse is ___; ice is cold, fire is ___; a snail is slow, a rabbit is ___; the sun shines during the day, the moon at ___."
Can give at least two ways objects are alike and two ways they are different, eg. pencil and crayon.

Dark Blue Straight Line - Pre-Test
Light Blue Broken Line - Post-Test

The Child Development Centers of U.C.P.B.
P.O. Box 8003, 465 Springhill Drive, Lexington, Kentucky 40503

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